

Center Licensing Inspection Full Report

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at <http://jfs.ohio.gov/CDC/childcare.stm>. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

Program Details			
Program Name Hairbows and Bowties Learning Academy LLC	Program Number 2240030541		Program Type Child Care Center
Address 4467 E 131th Garfield Heights OH 44105			County CUYAHOGA
Building Approval Date 11/08/2024	Use Group/Code E	Occupancy Limit 96	Maximum Under 2 ½
Fire Inspection Approval Date 11/08/2024	Food Service Risk Level Level III		

Inspection Information		
Inspection Type Pre-license	Inspection Scope Full	Inspection Notice Unannounced
Inspection Date 12/11/2024	Begin Time 10:00 AM	End Time 2:00 PM
Reviewer: REBECCA KOTEWICZ		

Summary of Findings				
No. Rules Verified 58	No. Rules with Non-compliances 9	No. Serious Risk 0	No. Moderate Risk 1	No. Low Risk 9

License Capacity and Enrollment at the Time of Inspection				
Age Group	License Capacity	Enrollment		
	Totals	Full Time	Part Time	Total
Infant (Birth to < 18 m)		0	0	0
Young Toddler		0	0	0
Total Under 2 ½ Years		0	0	0
Older Toddler		0	0	0
Preschool		0	0	0
School Age		0	0	0
Total Capacity/Enrollment		0	0	0

Staff-Child Ratios at the Time of Inspection			
Group	Age Group/Range	Ratio Observed	Comment

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Summary of Non-Compliances

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5101:2-12-03 and 5101:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

Serious Risk Non-Compliances

No Serious Risk Non-Compliances were observed during this inspection

Moderate Risk Non-Compliances

Domain: 08 Staff Files

Rule: 5101:2-12-09 Background Check Requirements

Code: The program is required to have all staff request background checks as required and receive a JFS 01176 or preliminary approval from ODJFS prior to allowing an individual to engage in assigned duties or be near children.

Finding: In review of the staff records, it was determined that background checks did not meet the requirements of the rule for the person(s) listed on the Employee Record Chart as noted in number(s) 1 below:

1. The request for a background check for child care was not submitted in the OPR.
2. The fingerprints were not submitted electronically according to the process established by BCI.
3. The individual(s) had engaged in assigned duties or were near children and preliminary approval from ODJFS was not on file.
4. Background checks were not updated every five years.

Submit the program's corrective action plan, which includes a copy of the JFS 01176, or a copy of the preliminary approval or a statement that the individual(s) are no longer engaged in assigned duties and are not near children until the preliminary approval has been received, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/11/2025

Low Risk Non-Compliances

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Equipment

Code: The program is required to use equipment, that is safe and hazard free, according to the manufacturer's guidelines. Fans, air conditioners, heat pumps, and space heaters must be inaccessible to children. The program is required to refrain from using trampolines, ball pits and inflatable equipment intended for climbing and bouncing, including but not limited to slides and bounce houses.

Finding: During the inspection, equipment was determined to be unsafe, hazardous to children, or in need of repair as noted in number(s) 18 below:

1. Manufacturer's guidelines for the [] were not followed in that [].
2. The straps were missing on the [].
3. The straps were attached, but were not used on the [].
4. The straps were attached and were used, but were not used in a safe manner.
5. The equipment had sharp points or corners.
6. The equipment had splinters.
7. The equipment had protruding nails.
8. The equipment had loose or rusty parts.
9. The equipment had paint which contains lead or other poisonous materials.
10. The equipment had hazardous features.
11. A fan was unstable and could easily tip over.
12. A fan had openings a finger could enter.
13. The pipes from the heat pump felt hot to the touch
14. A space heater felt hot to the touch
15. The position of a space heater was a tripping hazard
16. The air conditioning unit was not enclosed and was accessible to children on the playground.
17. A ball pit, trampoline, inflatable bounce house, inflatable slide, or inflatable equipment used for climbing and bouncing was used.
18. TV's were unstable and could easily tip over.

Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/11/2025

Domain: 02 Safe & Sanitary Environment

Rule: 5101:2-12-12 Safe Environment

Code: The program is required to provide an environment that protects the children in care from any items and conditions that may threaten their health, safety, and well-being.

Finding: During the inspection, it was determined that children were not protected from item(s) or condition(s) which may threaten their health, safety, or well-being as noted in number(s) 22 below:

1. Surge protectors/outlets did not have childproof receptacle covers.
2. Open pull cords that are not closed loop.
3. Toys or other items small enough to be swallowed were present in the space where infants and/or toddlers were in care.
4. Electrical/extension cords attached to an object that would not likely result in a severe injury if pulled.
5. Stacked chairs.
6. Employee(s) purse(s).
7. Diaper bags.
8. Television not securely anchored.
9. Small or lightweight pieces of shelving units are not securely anchored to the wall.
10. Smoke detector needing batteries replaced.
11. An area rug did not have a nonskid backing.
12. An area rug presented a tripping hazard.
13. A floor surface that was unsafe in that [].
14. No platform was provided for the sink or toilet in the [] classroom.
15. The platform provided for the sink or toilet in the [] classroom was not sturdy.
16. The platform provided for the sink or toilet in the [] classroom posed a safety hazard in that [].
17. Telephone cords.
18. Staff member stepped over a barrier/gate while holding a child.
19. Emergency exits were blocked by the following classroom furniture: [].
20. A mercury thermometer was being used to take a child's temperature.
21. Methods of ventilation used did not provide protection from rodents, insects, or other hazards.
22. Gate is needed in PS classroom.

Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/11/2025

Domain: 03 Postings & Equipment

Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post and implement the JFS 01242 "Medical, Dental, and General Emergency Plan" when necessary.

Finding: During the inspection, it was determined the requirements for the JFS 01242 "Medical, Dental, and General Emergency Plan for Child Care" were not followed as noted in number(s) 1 below:

1. The plan was not posted in each classroom.
2. The plan was not posted in other spaces used by children.
3. The name, address and telephone number of the program were not complete.
4. The location of first aid kit, fire extinguishers and fire alarm system, fire alarm pull stations and electrical circuit box were not complete.
5. The telephone number for emergency squad, fire department, hospital, poison control program, public children services agency, local health department, local emergency management agency, and police department were not complete.
6. Location of children's records was not complete.
7. Emergency information including any medications or supplies needed in the event of an evacuation was not complete.
8. The current version of the prescribed form was not used.
9. The plan was not implemented when necessary in that [].

Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/11/2025

Domain: 03 Postings & Equipment

Rule: 5101:2-12-17 Daily Schedule

Code: The program is required to have the daily program schedule posted in all required areas.

Finding: During the inspection, it was determined that a copy of the daily program schedule was not posted in the classrooms as required. Technical assistance was provided at the time of the inspection, and as discussed, please correct this rule noncompliance. A written response for this rule noncompliance is required at this time.

Corrective Action Plan Due: 01/11/2025

Domain: 03 Postings & Equipment

Rule: 5101:2-12-16 Medical, Dental, and General Emergency Plan

Code: The program is required to post the fire and weather plans.

Finding: During the inspection, it was determined that the following information was not posted for item number(s) 1, 2, 3 below:

1. Fire alert plan, including a diagram indicating evacuation routes.
2. Weather alert plan was missing details for [].
3. Weather alert plan was missing a diagram indicating evacuation routes.

Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/11/2025

Domain: 04 Indoor/Outdoor Space

Rule: 5101:2-12-11 Outdoor Space Requirements

Code: The program is required to have an outdoor play space free from trash and foreign objects.

Finding: During the inspection, it was determined that the outdoor play space was not free of trash or foreign objects as noted in number(s) 1, 15 below:

1. The outdoor area was littered with trash.
2. The trash can was missing a lid.
3. The trash can was not emptied from the day(s) before.
4. The trash can was overflowing with trash.
5. The trash can was infested with insects.
6. The trash can was visibly dirty.
7. There was broken glass.
8. There were tall weeds.
9. There was poison ivy.
10. There were tree branches.
11. There was mold visible.
12. There were thistles with prickles.
13. There were bird droppings.
14. The sandbox was contaminated.
15. Other; a deep hole was observed in the blacktop that a child could get stuck in.

Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/11/2025

Domain: 08 Staff Files

Rule: 5101:2-12-08 Child Care Staff Member Educational Requirements

Code: The program staff is required to have educational verification on file at the program.

Finding: In review of the staff records, it was determined that verification of a high school education for the child care staff member(s) listed on the Employee Record Chart, did not meet the requirements as listed in number(s) 1 below:

1. Verification of completion of a high school education was not on file.
2. Documentation was incomplete or not on file for a high school junior or senior who is enrolled in a career-technical program.
3. Documentation was not on file for a high school junior or senior who is also enrolled in a college credit program in child development or early childhood education.
4. Documentation was not on file for a high school junior or senior who is enrolled in a Child Development Associate (CDA) training program.

Submit the program's corrective action plan, which includes a copy of the education verification, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/11/2025

Domain: 08 Staff Files

Rule: 5101:2-12-08 Orientation Training & Whistle Blower Protection

Code: The program is required to have staff complete the online staff orientation training. Additionally, the training must be completed before they are permitted to have sole responsibility of children.

Finding: In review of the staff records, it was determined that child care staff member(s) did not meet the requirements for completing the online orientation training as noted in number(s) 2 below:

1. The training was not completed within 30 days of starting employment at the program as a child care staff member.
2. Documentation of completing the training after December 31, 2016 was not on file.
3. Completion of the training was not verified in the OPR.
4. A child care staff member had sole responsibility of children and had not completed the online orientation.

Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/11/2025

Domain: 08 Staff Files**Rule:** 5101:2-12-08 Medical Statement**Code:** The program staff's medical statements are required to be completed and on file at the program.

Finding: In review of the staff records, it was determined that the medical statements for the employees listed on the Employee Record Chart did not meet the requirements as listed in number(s) 3 below.

1. A medical statement was not on file for at least one employee;
2. The medical statement(s) on file did not have a date of examination within 12 months of the employee's first day of employment;
3. Date of examination was missing;
4. Signature, business address, or telephone number of the licensed physician, physician assistant, advanced practice nurse, certified midwife, or certified nurse practitioner who completed the examination was missing;
5. A statement was missing that verifies the employee is:
 - a. Physically fit for employment in a program caring for children;
 - b. Immunized against Tetanus, Diphtheria, Pertussis (Tdap);
 - c. Immunized against Measles, Mumps, and Rubella (MMR);
6. Tuberculosis (TB) screening/test information was missing:
 - a. Documentation of the screening process to determine if the employee resided in a country identified by the world health organization as having a high burden of TB and arrived in the United States within the five years preceding the date of application for employment.
 - b. Results of a TB test for employees meeting both criteria in 6a.
 - c. Results of additional testing for employees with a positive TB test.
 - d. Written statement, signed by a representative of the TB control unit, that the employee's TB is no longer infectious or the individual is receiving a TB treatment regimen for employees with a positive TB test.

Submit the program's corrective action plan, which includes a copy of the completed employee medical statement, or TB results/documentation, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 01/11/2025

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Building Department Inspection	Compliant	Documenting Statement: The building approval listed the following stipulation(s)/limitation(s): Max 96, 80 children, 12 teachers, 4 others..
Rule: 5101:2-12-04 Building Department Inspection	Compliant	Documenting Statement: A copy of the certificate of occupancy was available on-site for review.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Fire Inspection	Compliant	Documenting Statement: Please Note: Documentation of a fire inspection without any uncorrected violations must be secured for the program. Secure a new fire inspection by 11/08/25.

Rule	Status	Documenting Statement(s), If applicable
Rule: 5101:2-12-04 Food Service Requirements	Compliant	Documenting Statement: The food service license was observed posted. Following is the audit number and date of expiration: INV12597, MARCH 1, 2025.

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-07 Written Program Policies and Procedures	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-10 Health Training Requirements	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-13 Sanitary Equipment and Environment	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-20 Cots and Napping	Compliant	

Rule	Status	Documenting Statement(s), If applicable
5101:2-12-16 Written Disaster Plan	Compliant	